

THE
BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. XXXIV.

WEDNESDAY, MAY 20, 1846.

No. 16.

REMARKABLE CASE OF MENTAL ALIENATION.

By W. T. Wragg, M.D.

JOE, a young negro of about 20 years of age, possessing an average degree of intelligence, and having enjoyed good health up to the time when he was attacked with the illness which threw him into the remarkable condition in which I found him, resided on a plantation in the neighborhood of Charleston. His occupations were such as are common to persons in his situation; laboring in the cultivation of the soil. He was taken ill about the latter part of July, 1837, probably with fever of a bilious type. For about a fortnight he remained on the plantation, receiving such attention as the neighborhood afforded. It does not appear that he suffered from neglect, but it seemed evident that his case had not been judiciously treated. A report of his death reached his master, who resided in Charleston, and was the first intimation that he had that the boy was really seriously ill. This report caused a careful inquiry to be made into his real condition, when it was found that although he was not dead, yet his case was of so serious a character as to call for most careful attention. He was therefore brought to town. I saw him for the first time on Tuesday, 8th August, 1837, and found him laboring under violent delirium and a great deal of muscular irritability. I could obtain no satisfactory account of the manner in which the attack commenced, or of the nature and progress of the disease; except that he had had fever. His imagination, a faculty which, with him, had doubtless never, in his hours of health, been called into action, was awakened. He became impressed with the idea that he was dead. This, no doubt, originated from the report of his death, which had been current, and which had probably been spoken of in his presence.

Upon a mind laboring under so much excitement, and in which the exaggerations of timid and ignorant friends could find no counterpoise in the wholesome restraints of education, such an idea was calculated to produce a deep impression, and accordingly the patient was hurried away in the most extravagant language and conduct. From his false ground he drew inferences perfectly secutive, and which failed to be rational only because they started from unsound premises. He said that, being dead, his flesh would soon begin to rot and drop from his bones; remonstrated at being kept so long unburied; earnestly demanded that his grave clothes should be prepared and put upon him, and that he be laid out in

the usual form. He looked anxiously for the company to assemble which was to follow his body to the grave, and would chaunt in touching language a final adieu to his mother. The tune he selected was solemn, such as he was used to hear under similar circumstances. He would pick and pull at his flesh, while he called on the bystanders to look at him closely, and satisfy themselves that he was really dead.

In the midst of these interesting and deeply touching scenes, he would sometimes burst suddenly into a fit of hearty laughter, and then as suddenly, as if rebuked by his conscience for the indecent levity of such conduct in one who was already an inhabitant of another world, he would check his mirth. And then, his countenance would be marked in every feature with an expression of the deepest solemnity, he would address himself earnestly to some object in the room, as though he were in the presence of the Almighty, and deeply awed by his majesty; he would then, in the most earnest and appropriate language, give expression to his feelings of reverence for the Great Being in whose presence he stood; and with the attitude and accent of prayer, acknowledge his power to save or destroy. Fully impressed with the idea that he was indeed dead, and a dweller amongst immortal spirits in that world which his religious instruction had taught him to believe would receive his soul, when death had released it from its fleshy tenement; his countenance and his every action took a serious, a sublime expression from the thought, and his whole deportment was such as could not fail to touch and awe all who saw him. He would remain for some time enveloped in this rhapsody. He heard nothing of what passed near him, and saw only the majestic creation of his imagination, and lived only in regions which his mental infirmity had painted, till they seemed like those of another and brighter world.

Gradually, after a day or two, his delirium took a character of gaiety. His countenance wore a pleasant smile, and a vein of humor marked his conversation. But if opposed, he would resist forcibly; making powerful muscular efforts, and once he inflicted a severe blow on one of the bystanders. He would sing a tune with perfect accuracy, adapting to it, as he proceeded, words suggested by what was passing around him. When questioned, he would chaunt his answer with perfect correctness, thus conveying all the required information concerning his feelings, his wishes and his thoughts. His gestures were easy and appropriate, nor could he be restrained from making them, by any mechanical opposition placed in his way; for there was a rigid and unyielding energy in his muscular contractions, that overpowered all resistance, like the delirious and convulsive movements of a patient laboring under phrenitis. Restraint made him violent; but if he succeeded in releasing himself, or the restraint was removed, upon the instant a mild and gentle smile threw its bland expression over his face, and he became obedient to a single word, if uttered in a gentle tone. He knew his mother, and always spoke to her with kindness.

This musical mania continued for two days. About the third day he ceased singing, and the most remarkable peculiarity that his delirium had

yet assumed now presented itself. He spoke in rhyme ! As he had before made all his answers to the questions put to him, and his voluntary remarks, in a measured and musical tone, so did he now communicate his thoughts in well-selected rhymes. He would sometimes rhyme repeatedly on the same word. Again his transitions would be rapidly made from one sound to another, of an entirely different kind. At all times the words were so selected as to make the most perfect rhyme. And he displayed a degree of ingenuity in collecting and bringing into use, in the most apposite manner, a large number of similar sounding words, which would have appeared astonishing even in one who had been rendered familiar, by education and habit, with language in all its perfectness. But it must be remembered that this individual was a slave, perfectly uneducated, and showing no further knowledge of language than was sufficient for expressing his few and simple wants. Negroes have some quickness in catching musical sounds, and in repeating simple tunes by air ; hence I was not surprised to hear him sing ; though the quickness with which he adapted his answers and remarks to the tune he was singing, was indeed remarkable. But the ease with which he rhymed was truly astonishing.

The medical history and treatment of the case were as follows :—

The patient had been long suffering for want of rest, and for several nights continued to be sleepless. He had well-marked exacerbations towards night, when his pulse, which throughout the day would continue nearly at a healthy standard, became quick, small and irritable. During the exacerbations he paid no attention to what was said to him, unless spoken to earnestly. He would then listen attentively, and would readily promise obedience to any directions ; and he always kept his word.

After repeated bleeding, both general and local, blistering, purging, hot pediluvia, with mustard, and other means of depletion and derivation, his madness became more calm, but he never said anything rational ; only making in various ways a few half-intelligible complaints of the blister which had been put on his head. His rest returned to him. He would sleep well at night, and frequently had refreshing naps through the day. His appetite became good, so that he eat heartily and with relish.

On the 17th of August, nine days after I first saw him, when the depletory revulsive measures mentioned, had removed all symptoms of excitement except the delirium, a seton was put in the back of the neck. He was very much alarmed at the idea of the operation, and the sight of the knife and other preparations caused him to shudder, and it was evident he suffered as much mental as bodily pain. But when assured that the operation would benefit him, and that it was only done for his own good, he became calm, and expressed himself thankful.

The seton remained till Saturday, the 14th of October, fifty-eight days from the time of its insertion. The delirium abated evidently and steadily from the time that suppuration was so established. He soon began to walk about the room, then in the street near his residence, and gradually extending his promenade, came to see me at my office, and report on his condition. When the seton was removed, his intellect was

perfectly clear, and his physical health completely restored. No inconvenience resulted from the drying up of the suppuration, and he returned to his occupation in perfectly-restored health.—*Southern Journal of Medicine and Pharmacy.*

HOOPING COUGH.

From Dr. J. A. Swett's Lectures on Diseases of the Chest.

THERE is a peculiar form of bronchitis, called hooping cough, which generally lasts for two months; it usually commences like an ordinary catarrh; though even in the commencement, the paroxysms of coughing are, perhaps, a little more violent than in the early stage of common catarrh; it goes on increasing in violence for ten days, when its character is fully developed, and finally the fits of coughing are so violent, that the face becomes livid, and the jugular distended, till at last, an inspiration takes place, with a loud hooping, which gives some relief; the cough, however, again returns two or three times, until a thin, glairy mucus is expectorated, or perhaps the child vomits; the paroxysm is then over. The glairy mucus, which accumulates in the bronchial tubes, appears to have been the exciting cause of the cough; this paroxysm may be repeated every ten or fifteen minutes, or it may only occur two or three times a day. This state of things will continue two or three weeks, or even four, then growing less and less pronounced, until it assumes the form of a simple catarrh, and passes away. You frequently find no physical signs present; if you listen during the paroxysm, you will hear nothing at all, and even during the loud inspiration, nothing is heard, it appears entirely confined to the larynx. The nature of this hoop escapes pathology altogether; there are no *post-mortem* appearances beyond those common to bronchitis, and yet there are peculiar features in this disease; it occurs but once during life, and is contagious. It is not dangerous, unless some previous disease has made inroads on the constitution, such as diarrhoea; it then often proves fatal; but if the child is healthy, unless the disease becomes complicated with some other disease, it is not dangerous. There are two complications you must be on the watch for, during the prevalence of hooping cough; one is *congestion of the brain*, the other *inflammation of the lungs*. It is not at all surprising, that congestion of the brain should ensue, when we remember the strong determination of blood to the head, which exists during the paroxysm. If, then, we find the child inclined to drowsiness, with a flushed face, and a tendency to heat about the head, we should at once take the alarm, else convulsions and fatal coma may ensue. So, if we find that the child complains of pain or coughing, that the breathing is permanently oppressed with fever, accelerated pulse, loss of appetite and spirits, we should at once fear the supervention of a serious inflammation of the chest. In both these cases, the hoop diminishes or even ceases; but this, occurring while the child is evidently worse, can hardly be misinterpreted.

Again, this disease, which under favorable circumstances usually terminates in two months, is liable to be prolonged to an indefinite period by relapses. The child may have ceased to hoop entirely and for some time, but a fresh attack of bronchitis will bring back the hoop, and this may be repeated until the disease becomes established by a sort of habit. We observe the same in other specific inflammations; thus, a gonorrhœa will seem entirely cured, and yet, under the influence of local excitement, it will return with all its specific characters.

Treatment of Hooping Cough.—This being a specific disease, arising from some specific cause, and as it must always run its course before health can be re-established, it does not in general require any particular medical treatment. When it occurs in children, it requires that prudence be exercised, guarding the patient from exposure to bad weather, or the evening air, regulating the diet, and avoiding the occurrence of febrile attacks, by cutting down the allowance of animal food. If the disease can be made to run on favorably, without medical treatment, it will probably be the better.

Sometimes we find particular symptoms predominating; thus, sometimes, you will find slight indications of febrile action after the first few days, the appetite failing, and pain present, that may lead you to suspect pneumonia, or some other affection; such a case you may treat antiphlogistically, regulating it, however, according to circumstances, as to whether the child is plethoric or not. In many cases, it is connected with ordinary bronchitis, indicated by the sibilant and sonorous ronchi, and the mucous rattle at the base of the lung; if these are trifling, they will require no treatment, but if more serious, they may lead to congestion of the lungs; these symptoms you may overcome by tartar emetic, low diet, the warm bath, &c.; if it is mild, Cox's hive syrup will be found sufficient. Whenever the lungs or the brain are attacked, your treatment ought to be immediately addressed towards them, and as actively as the case may admit.

In delicate, feeble children, and in others where frequent relapses have occurred, the disease is sometimes prolonged by a sort of habit; in such cases you must resort to the tonics, quinine, iron, the mineral acids, &c. Garlic is a very popular remedy, taken internally, and rubbed along the spine; in some cases it has the effect of breaking up the cough, while in others it has but little effect. If the cough still withstands all these remedies, the last, and almost unfailing resource, is the change of air; this has usually the effect of completely breaking it up. But in an ordinary simple case, I do not think there is any remedy that will control the deviation of the hooping cough; it has a definite course, and that it will run.—*New York Medical and Surgical Reporter.*

A CASE OF PURPURA HEMORRHAGICA.

By W. D. Harris, M.D., of Utica, Mississippi.

THE following case, which occurred in my practice, being of a somewhat novel character, may not be uninteresting, I hope, to some of the numerous readers of the Journal.

October 9th, 1845.—I was called to visit Miss M. S., aged 23 years, of small size, dark hair and complexion, health and constitution delicate from childhood, whom I had attended sixteen months previous for spinal irritation, together with a slight affection of the uterus, and considerable bronchial difficulty, with pain in the left side, &c.

When I arrived on this occasion, I found her laboring under the following symptoms:—hemorrhage from the nose, somewhat profuse, of thirty hours' duration—also from every part of the body, as well as the head, neck and face; the blood oozed out through the pores of the skin, resembling mosquito bites, in some places in clusters thicker than others. Knowing her constitution to be delicate, I supposed that there must be some derangement of the catamenia; but on inquiry found that her health in that respect was as good as usual. Previous to my visit, she had been under the care of a talented quack for a pain in the side, with some debility of the lungs, for which she was using externally veratria ointment, and taking internally deutiodide of mercury, with iodide of potassium, up to the time when I made my first visit. I prescribed alum water to the nostrils, and a plug saturated with the same to be inserted into the nose; wash for the body, dilute acid of vitriol; gave a blue pill and sulph. quinine sufficient to move the bowels; spirits of nitre and paregoric as a diuretic in teaspoonful doses every three hours; and Dover's powder sufficient to allay nervous excitability, and procure rest.

10th.—Saw my patient at 9, A. M.; found her relieved from the hemorrhage of the skin, but from the left nostril blood still continued to flow freely. Medicine had moved the bowels; tongue clean; pulse 100. The dilute oil of vitriol had a beneficial effect on the skin, though attended in its application with some nervous excitement, which was allayed by Dover's powder.

As I looked on the hemorrhage as passive from the beginning, I prescribed dilute creosote to the nose with a plug; oak bark and alum wash to the skin; and gave sulph. quinine in three-grain doses alternately with Dover's powder in five-grain doses every four hours, and persesquinitrate of iron in twelve drops three times a-day; kept the bowels open with mild cathartics.

11th.—Found my patient still bleeding at the nose, though less profusely; pulse feeble, beating 110 per minute; skin soft; patient had spent a restless night, attended with strong hysterical symptoms, and slight derangement of intellect at times. Continued the creosote to the nose, finding it to be the best among the many remedies that were tried. Ordered the alum hip-bath; continued the quinine and Dover's powder, and gave ten drops of tinct. iodide of iron instead of the nitrate. Her mouth now was slightly touched with the mercury, either the blue pill, or the stronger preparations which she had been taking before my first visit.

12th.—Saw her this morning in consultation with my friend Dr. Bush; found her very much as on the day previous; continued the same treatment, adding the compound tinct. of catechu to be applied to the nose, and given internally.

13th.—Still bleeding at the nose, though much less profusely; continued the creosote, as it seemed to be the only application which was of any service; symptoms much the same as yesterday; hysteria still continues; treatment the same, only syrup morphine added to control the nervous irritability.

14th.—This morning found my patient relieved from hemorrhage from the nose; pulse small and frequent; skin moist; extremities cool; exceedingly feeble, and easily excited to crying or laughter; mouth sore, cheeks swollen, notwithstanding the bowels have been opened every day with mild cathartics. This day the catamenia came on, and at times was somewhat profuse, producing the greatest alarm, but all persuasions of her mother or myself were unavailing to induce her to suffer any local application to be made. Continued general treatment; added tinct. myrrh in drachm doses. She now began to improve slowly, and was furnished with such medicines from the shop as her condition required from time to time.

December 3.—Was called to my patient again; on arriving I found her laboring under uterine hemorrhage in the strict sense of the word. This, of course, produced much alarm. I explained the nature of the case, and assured her that there was no danger, as it was of very frequent occurrence, though not in unmarried women. It readily yielded to the usual treatment; since which time she has recovered her usual health and spirits.

I might mention, in conclusion, that this young lady belongs to one of the most respectable families in the farming community, who never knew want, or participated in luxurious indulgences. I present the case as it occurred, without comment. How far the powerful agents she was using had any share in producing the state of things above recited, I shall not attempt to determine. The pathology of purpura is still involved in great obscurity. The multiplication of cases must ultimately clear it up. In that view, I trust the one which I have given may be found to be of some value.—*Western Journal of Medicine and Surgery.*

UTILITY OF A KNOWLEDGE OF THE TEMPERAMENTS.

By F. Robinson, Esq., Surgeon, Hammersmith.

THAT different temperaments appear in a certain degree to influence the performance of various actions differing in their nature, is a fact that seems to have been tolerably well established by acute observers of human nature. It is only, however, at a comparatively late period, that the connection existing between the various expressions of the countenance and the temper has been at all definitely pointed out, and the fact that the former are in a greater or less degree symbolical of the latter established

beyond doubt. Phrenologists are evidently aware of the utility of this circumstance, in giving additional strength to their doctrines, and generally call it to their aid in forming an opinion of the cranial development of an individual. But the importance of a knowledge of the temperaments, their various characteristics and influences in medicine, appeared to meet with little of the attention it deserved, and to have passed almost wholly unnoticed by writers, till the time of Lavater. Even that writer, in his *Essay on Physiognomy*, only mentions superficially, and in somewhat vague terms, the benefit that might be derived from a study of this branch in connection with disease.

I shall endeavor to point out briefly some of the principal advantages accruing from its study, which appear to me worthy of attention, as tending to elucidate the intricacies of disease: but before doing so, may be permitted to state that I do not lay claim to originality in some of the following remarks, which have been, and probably are being, daily observed by physicians in extensive practice, my object being to call some notice to what, from the little mention made of it by writers of the present day, appears to be considered an unimportant, if not decidedly useless study. That the fathers of the profession, when it was yet in its infancy, deemed it worthy of the closest attention at a time when their knowledge of disease was very limited (comparatively), their means of alleviating it few and simple, and of those few, many depending, not improbably, for their success upon their influence on the patient's own imagination, is extremely likely, and is, in fact, partly confirmed in their own writings. I would observe, then,

1. That certain remedies possess different degrees of effect in their action on individuals of different temperaments. This may frequently be noticed by physicians in large practice, as a medicine which will act almost as a specific in controlling the progress of disease in an individual of one temperament, will be found inert, if not positively injurious, in a like disease and same stage in another. This might, in an individual case, be attributed to that inexplicable condition termed idiosyncrasy; but whoever has opportunities of trying one remedy for a fixed period on persons of all temperaments (their complaints, of course, being of the same nature and duration), and then carefully analyzes the results, will in all probability be convinced to the contrary. Undoubtedly, he would meet with occasional instances where a remedy possessing considerable power in these cases—in the majority of them—fails in an individual one, without any apparent cause to account for it; and if, in conjunction with this, a minimum dose of the medicine produces the effect of a maximum, or entirely different symptoms, *this* would appear to me to merit the appellation of idiosyncrasy (as far as our knowledge of the term permits us to employ it), provided, of course, that nothing abnormal is detected in the individual that could at all affect the action of the remedy.

It must be confessed, also, that there are numerous diseases, incident to individuals of all temperaments, in which no distinction can be drawn in the action of medicines, as they may one or all fail or succeed without

our being able to explain "why." Are we not in the habit of trying one, and, in the event of failure, commencing with another, approved remedy for a disease, without stopping to consider the cause of that remedy failing? It being thus proved that a remedy possesses a greater degree of efficacy in a disease occurring in a person of one temperament than another, how are we to account for this circumstance? Provided no abnormal condition exists, it appears to me that, as far as our present knowledge extends, we can only attribute this peculiarity to one cause, and that, necessarily, an obscure one, viz., that the organization of the nervous system modifies, in some (as yet hidden) manner, the action of the remedy, or its absorption. That this *modus operandi* exists in the healthy human frame, when subjected to the action of one class of stimuli, viz., alcoholic, is proved, I think, beyond doubt.

Dr. Macnish, in his "Anatomy of Drunkenness," has shown the very opposite effects produced by intoxicating liquors on individuals of different organism, as well as the various degrees of rapidity in producing its action on individuals equally unaccustomed to its stimulus. Judging from these facts, it does not appear improbable that the action of some medicines, as, for instance, diffusible stimuli, is materially influenced by the temperaments in health, and also disease. Let us suppose that an individual takes a quantity of some narcotic poison, opium—for example, whose action is primarily to stimulate—and suffers it to remain for a period that, in many persons, would prove fatal. Nevertheless, the proper remedial measures being adopted, he recovers, in some instances, and this is invariably attributed by the patient's friends and medical attendant to the individual's constitution, previous good health, &c.; or some other cause known to affect the action of the poison, as the amount of food in the viscus, without considering the possibility of one person's frame being more susceptible to the action of the poison than another's. It is not, as far as I am aware, in opposition to any known physiological principles, to suppose that opium would be capable of producing quicker and more deadly effects on a person of thin, spare habit (though of sound health), and highly nervous, bilious temperament, than a large robust individual of lymphatic sanguineous temperament. A case of accidental poisoning that occurred to me to treat lately, strengthened this opinion.

2. That certain classes of diseases are particularly liable to originate in persons of certain temperaments.

This is a circumstance that cannot well escape the observation of an attentive practitioner, and in large hospitals especially. I may briefly mention, as examples, the occurrence of acute rheumatism, and, consequently, often of pericarditis, in individuals in whose temperaments the sanguine predominates. Anasarca and ascites, dependent on renal disease, in persons of lymphatic, or lymphatic sanguineous temperaments, and ascites, dependent on hepatic disease, in those in which the bilious predominates. A careful comparison of cases convinced me of the truth of this theory in a general point of view; and my observations not being confined to individuals of the same trade and habits, but all the numerous classes of artisans met with in a large manufacturing and com-

mercial district, they cannot be said to be derived from, or rendered applicable to, one class of mechanics only. A greater tendency also appeared to me to exist, to the generation of organic disease, perhaps especially that of the liver, in individuals of highly bilious nervous temperament; and this hypothesis would appear to be partly confirmed by the observation of a recent writer, who mentions the comparative frequency of carcinoma of the uterus (in a number of cases treated by him) in females of highly bilious temperament.

With regard to the utility of a knowledge of the temperaments in surgical diseases and accidents, the principal benefit that I conceive to be derived is, in many instances, to render the diagnosis and prognosis more clear and certain, and thus afford material assistance to him in some cases.

It has been my endeavor, in the foregoing remarks, to treat as concisely as possible some of the leading points connected with a subject that admits of very extensive research, even if one not capable of affording material assistance to the physician in the diagnosis and treatment of disease, at least one that might tend to elucidate some of those as yet hidden phenomena which we meet with in practice; and my object, in giving publication to these brief and imperfect remarks is—through the medium of the *Lancet*—if possible, to draw attention to the subject. It is now a year since most of the foregoing notes were made, at a time when enjoying considerable opportunities for so doing, and my subsequent experience has tended to confirm the opinions I entertained then.—*London Lancet*.

CASE OF INVERSION OF THE UTERUS.

By E. Fisher, M.D., of Waynesville, Ohio.

ON the 26th of September, 1835, at 10 o'clock, A. M., I was called to Mrs. D——, in labor. She was about 35 years of age, and had given birth to several children—said that two weeks previously, in attending the funeral of a relative, she rode several miles in a farm-waggon over rough roads, which excited pain in the loins and hips, and weakness of the inferior extremities, attended with difficulty of locomotion; all of which continued up to the morning of the 26th.

From the day of the funeral she had felt no motion of the fœtus, and, to use her own language, she was "eight months gone in pregnancy." The pains were slight, irregular and transient. Upon examination I found the pelvis unusually large, the os uteri well dilated, and the membranes protruding. The temperature of the skin was natural, pulse regular, and bowels open.

As I conceived there was but little to fear, I deemed it prudent to give nature time to effect her purpose. Ten grains of pulvis Doveri were administered, which procured an hour's repose. The pains then returned, but continued feeble an hour longer without any appreciable change, when suddenly a violent throë thrust fœtus, placenta, and body of the uterus beyond the labia exteriora.

The fœtus was very small and putrid; the funis umbilicalis, as nearly as I could estimate it (not having any means of measurement), was eight inches in length. The placenta was detached, and complete inversion of the uterus had taken place. I was shocked for a moment with the condition of my patient, but knowing there was no time to be lost, I immediately commenced an attempt to return the uterus. I passed the index of the right hand into the vagina, then carried it round the tumor, till I became fully satisfied as to the condition of the parts. The os uteri looked into the pelvic cavity, and the finger could not be brought into contact with it.

The uterus was as flaccid as a wet bladder; a circumstance which inspired a ray of hope that something might be done to relieve the patient from a situation but little more desirable than death. I placed the fingers of my right hand against the fundus of the uterus, pressing it gently upwards in the direction of the axis of the inferior strait, while the left hand was placed over the hypogastric region to prevent the uterus from rising into the abdomen. I carried my right hand up the vagina a sufficient extent to enable me to return the uterus, which was done with less difficulty than could have been anticipated. Not the slightest contraction of either the fundus, body, or neck of the organ, took place during the operation. I made an attempt to withdraw my hand, and the fundus followed it. And notwithstanding frictions were made over the hypogastrium with the left hand, while the knuckles of the right were caused to press against the fundus of the organ within, the uterus still remained flaccid, and during some minutes manifested no disposition to contract. I ordered one drachm of secale cornutum infused in six ounces of water, two ounces of which were to be given every ten minutes; the third portion produced contractions, and by grasping the fundus between the thumb and fingers of the left hand, through the walls of the abdomen, in less than fifteen minutes the contractions became so violent that my hand was forced out into the vagina. No further difficulty ensued. The hemorrhage was less than in an ordinary case of labor at the full period of utero-gestation, and neither pain nor syncope occurred prior to or during the inversion of the organ. The practicability of returning the uterus when a complete inversion has taken place, has been doubted by Dr. Dewees, he not having been able to succeed in those cases that came under his observation, on account of the contracted condition of the cervix uteri, and while the fundus and body remained in a relaxed condition. He conceived that in such cases the disproportion between the several parts of the organ was so great, and its attachment with the pelvis so low, that any attempt at restoration must prove abortive. In the case of Mrs. D. an injury had been sustained by travelling in a farm waggon over rough roads—a dead fœtus retained in the uterus some days—the funis umbilicalis some eight inches in length, and when the labor came on, the fœtus appeared to be expelled almost entirely by the action of the abdominal muscles. In Dewees's cases, atony of the fundus and body existed, while the cervix and os uteri retained their contractile power. In the case under consideration the fundus, body, cervix and os uteri were in a state of extreme atony.—*Illinois Medical and Surgical Journal.*

MEDICAL TOURIST'S NOTES.

[DR. JOHN SPENCE, JR., of Boston, who has recently been travelling in Europe, is the writer of those graphic letters in the Christian Watchman, of this city, under the unassuming title of "Pencil Sketches on a Voyage to, and a Tour in, England." This is what he says of medical things in a Liverpool Jail, and other matters.]

In company with a surgeon, I visited one of the prisons or jails in Liverpool. After seeing those patients who were sick, we retired to the surgeon's office, located in the yard, where those prisoners who complain of sickness, are ranged along with their faces towards the wall. They are called in, one by one, and state their ailments. The inducements to feign sickness are many, and oftentimes it is a difficult matter to decide in reference to their complaints. When they state that they are sick, and there is reason to doubt it, the daily allowance of bread is cut down, or they are put upon a light diet, or *mica panis*, rolled into a pill, is administered, which oftentimes cures them. With a little faith, even as a grain of mustard seed, bread pills will often work wonders—as startling in their effect, as *one*, or a thimblefull of *wee homœopathic pills*, when the mind feigns, or fancies, disease. And these tiny pills, that one can pick up in almost any number upon the point of a cambric needle, which are about as large as the little end of nothing, possess such a wonderful and hidden energy ! and they are so *very* small, and so *very* sugary, and so *very* white, and so diluted, and expanded like gold leaf ; and the system is so novel, and the liquid medicines must have so many *shakes*, and *then* the pills won't choke, but melt in the mouth like sugar plums, or even as a frozen rain drop ; and then there are so many mortals that will have fancied and ideal diseases—without a local habitation and a name—why, who can wonder ? It is evident that it requires nothing to cure nothing—*similia similibus*.

And now concerning water, used not in minute doses, but by tumblers full, in long array, not only internally but externally, not as an abluent, but as a panacea ; and why not drink water, as it stands at the head of the list in prison bills of fare. There is that twin absurdity, yelped hydropathy, or water cure. And who does not know that water—one of the most abundant elements in nature—is good to bathe in, circulating and quickening the blood ; or that where there is an excess of heat in the human system, there is an excess of blood ; that life is an internal fire, which air fans and food feeds ; and that gelid water, or ice even, is a most powerful local remedy in active inflammation. This latter is one of the cardinal principles of surgery. And who does not know that pure water is better as a drink than rum. Who was it that started the cry of water as the panacea for all "the ills that flesh is heir to" ? Was it that son of the Emerald Isle, who, as his wife said, "lay *spacheless* all the month of June, crying water, wa-ter" ? I see that Bulwer, *even*, has come out with a long manifesto in favor of water cure, from actual experiment. He speaks in glowing terms of the magic efficacy of this element. If he had quaffed and steeped himself in this innocent liquid in lieu of

others, he might have been ignorant of the simple virtues of the mountain stream, when bathed in. If our hydropathists would enlist their efforts in behalf of temperance, and turn erring man from liquid fires, to drink at the cool and clear crystal spring, or enjoin upon mankind, when in health, to lave in ocean's fount, instead of lauding water, water, as the sovereign cure for all diseases, they would confer a lasting benefit upon humanity.

PUBLIC CONSISTENCY—THE STUDY OF ANATOMY.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Having taken some notice of public opinion and of State Legislation in years gone by, I thought I would communicate some of my thoughts to the Editor of the Medical and Surgical Journal; and whether or not he thinks they are worth inserting in that highly useful publication, I shall submit entirely to his judgment. The public frequently expect more of physicians than they have the ability to perform, and unreasonable expectations often end in sore and aggravated disappointment. The physician is in an unenviable, and any condition but a comfortable one, when the disease of his patient is beyond the power of his skill to alleviate, and his friends are trusting to the physician as one endowed with supernatural power.

The public demands of us a thorough knowledge of our profession in its various branches. If a bone is dislocated, we must know how to reduce it with despatch. If a tumor is to be removed, we must know how to extirpate it without interfering with those tissues which are essential to life, and be able to restrain hemorrhage. And, finally, we are required to manifest the highest degree of skill, with decision of character, and to be expert in all our surgical operations. If the physician is called to the bed of the sick, he must have a knowledge of the organ diseased, its situation and structure, and how to apply the remedy. Now to accomplish all these requirements, a person must have a knowledge of anatomy. And what says the public on that subject? Why the law and the people say you must not have a dead body for dissection, unless you steal it; and the law says thou shall not steal. Must, then, the students, who are in pursuit of this necessary information, become thieves? and undertake the most revolting of all robberies, robbing the graves of their deposits? And what comes next, if they happen to be detected in their depredations? Why they are shot down like the most noxious of dumb beasts, or are hunted like sheep-stealing wolves from place to place, with loss of character if not the loss of life, till the boundaries of more than one State interpose between them and their attempted prize.

The act passed in our Legislature "concerning the study of medicine" in 1845, reminds me of the anecdote of the old gentleman, whose wife brought her husband a large land estate. The old man, one day, feeling in an uncommon affectionate mood, informed his wife that he had made his will and had given her one third part of all his estate. She replied, with "suitable resentment," "the d—l thank you for that—I don't, I

could have held that without your liberality, and am no better off than I was before you made your will." Yours, &c.

Wilmington, May 9, 1846.

SILAS BROWN.

PREVENTION OF EARLY BALDNESS AND GRAY HAIRS.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—When I was short of 40 years old, I became quite gray, and my hair fell off so much that I began to entertain serious thought of getting a wig. On recovering from a sickness about that time, with dry skin and dry scalp, and being sedentary from necessity, I contracted the habit of using a common pocket-hair comb, daily, and often in the day, without regarding what remained of my hair, as I had made up my mind that I must wear a wig. To my pleasant surprise, I found the white hairs were daily disappearing, and their places were being supplied with a fresh crop of healthy hair. I have continued, of course, the use of the comb—and now, at 60 years, though my muzzle is as gray as a badger, my poll is well covered with a respectable fleece of healthy hair, and not a gray one to be found.

Yours, &c.

I.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, MAY 20, 1846.

Being Venerable.—Graphic sketches occasionally appear in the medical publications, here and there, accompanied by observations on contemporary journals, in which our own is very respectfully called *venerable*, as though it were well advanced towards the conclusion of one hundred years, at least! This is all quite proper, in a country where things are old when not much more than thirty years of age. However much it may savor of distinction to be denominated the *venerable*, as the Buffalo Journal calls us, although we are not conscious of any signs of decay, it may not be out of place to say, that the green old age of the Boston Medical and Surgical Journal is to be referred to a distant future—a period when spectacles, a bent form and snow white locks, shall present the evidences of being worn out with age and uninterrupted industry.

Hartford Co. Medical Society, Ct.—The members had a spirited and instructive meeting, Dr. Archibald Welch in the chair, on Thursday, April 9th. The preliminary business of the meeting being disposed of, a Dissertation was read, pursuant to appointment, by Sidney Rockwell, M.D., of South Windsor, entitled—"Present State of Medical Affairs in Hartford County." It was a well written paper, says a Hartford Journal, confined chiefly, however, to a notice somewhat detailed of the various forms of empiricism which prevail in this county, and the readiness with which

too many, of whom better things might be expected, become its dupes, if not willing and active advocates. Certain facts and circumstances which were stated in the dissertation, seemed to imply, that the more palpable the absurdity of a new notion pertaining to medicine, and the more ignorant of the principles of medicine—principles which the experience of ages has served to elucidate and confirm—were its advocates, self-styled doctors, the more speedily did the former find favor, and the latter practice.

The picture which was presented by the doctor, graphic, truthful and eloquent, was regarded by his brethren with deep regret: the rather as it indicated a surprising credulity on the part of many, the result of which must often of necessity be disastrous, and anything but a just recompense to much of fraud and deception—than because of any diminution which might result therefrom to their own professional emoluments.

A Dissertation entitled "Diagnosis" was then read by appointment, by Dr. Roswell Hawley, of South Glastenbury, in which both the method of ascertaining, and the great importance of a clear and accurate idea of the nature and extent of those lesions, whether organic or functional, which physicians are called to treat, were set forth, and illustrated by several well-chosen examples. So entirely did the views presented by the doctor accord with the sentiments of those present, that they were adopted with little discussion.

Vermont Medical Society.—A semi-annual meeting of the Vermont Medical Society will be holden on Wednesday, June 10, in connection with the commencement of the Vermont Medical College, at Woodstock, and a general attendance of delegates and regular members of the profession is solicited.

R. W. Rockwell, M.D., of Brattleboro', and Orin Smith, M.D., of Berlin, have been appointed to give addresses before the Society; "and we have every reason to believe," says Dr. Allen, the Secretary, "that each gentleman will very acceptably discharge the duty of his appointment." Medical gentlemen who may have interesting and useful facts to communicate, are requested to come prepared to present them to the Society as time and opportunity may occur.

Middlesex District Medical Society.—To-day is the anniversary of this association, at Lowell, Mass. Dr. J. Curtis, of that city, will deliver an address, which will, no doubt, be a good discourse. Medical advice and surgical operations are gratuitous, on that occasion, to all patients who may present themselves. Officers are to be chosen for the ensuing year. Dr. Cutler, of Pepperell, is now the President.

"A Question of Originality Settled."—Such is the title of a half-sheet pamphlet, reprinted from the New Orleans Medical and Surgical Journal, by Dr. Dowler, of that city, in relation to *febrile calorificity, both before and after death*. Dr. Dowler is a man of deep research, and abundantly able to maintain his claim to priority of discovery in this matter, against the whole medical press of England, if it were at all necessary to make such extraordinary exertions.

Eastern Medical Reformer.—In Rutland, Vt., a journal is published monthly, claiming to be devoted to the Herculean labor of medical reform. The revolution this little feeble instrument would produce, if it could, would probably be hardly recognized in the great world, since it is exceedingly difficult to understand what the editor proposes to accomplish. One prominent fact should not be lost sight of by the readers of this mighty sheet sent forth from the summit of the Green Mountains, viz., that Dr. Hibbard, the editor, notifies the public that he will be at certain places in the course of thirty days, to pour in the oil and wine in the case of those who are so simple as to swallow the bait. So the secret of this reforming individual's philanthropic efforts to enlighten the people on medicine, is contained in this trite saying—"there are tricks in all trades but mine."

Anatomical Commission Agency.—By a circular through the post office, we are informed that Dr. Wm. A. Clendinen, of Baltimore, intends proceeding at once to Paris, where he will become an agent "for the purchase of anatomical preparations, models, casts; surgical instruments and appliances; scientific apparatus; medical, surgical and scientific books, plates and engravings; matters of professional and artistic interest. The importance of the Schools of Pathology in Paris, and the advantages arising from them for obtaining the most perfect specimens of morbid anatomy, are too generally known to need comment.

"Letters should be most legibly directed to Dr. Wm. A. Clendinen, care of Messrs. A. Bininger & Co., New York, or of Messrs. Clark & Kellogg, Baltimore, who will promptly forward them. In no case will orders be attended to, when unaccompanied by satisfactory remittances, for the amount of which, either of the above firms will receipt; but all cash orders (howsoever small), will, when explicitly detailed in writing, be promptly executed. The average commissions will not exceed ten per cent."

His references to professional gentlemen in various cities are unexceptionable. The idea is original, and may prove both convenient and economical for purchasers in the United States.

Books on Hydropathy.—The editor of the Vermont hydropathic paper says he is frequently asked what works to read, explanatory of the cold water cure. Here follows his catalogue:—"Some of the best have not been yet translated from the German; but Weiss, one of the best, has been translated and published in England; Capt. Claridge's and Dr. Wilson's, English works, are also valuable. These can only be obtained by ordering them from England. An excellent little work by Dr. Balburnie, has been re-published in New York, and is to be had for twenty-five cents, and is, perhaps, the best book easily obtainable. A little compendium of translations from German treatises by F. Gröter, was some time ago published by Radde, N. Y., for about seventy-five cents. Dr. Shew has also published one large and several small works."

A Country where Medicine was unknown.—According to Capt. Wilkes, the practice of medicine was wholly unknown in the Hawaiian Islands before their discovery by modern navigators. The natives had no physi-

cians—and the only approximation to medical treatment was, that when they had eaten too much, they drank sea-water in large quantities, which acted as a vigorous cathartic. They also resorted to *loomi-loomi*, or kneading the body with their hands, in cases of fatigue or pain—a custom still in vogue. In the reign of Atapai, the predecessor of Kalaïopu, who was king when Capt. Cook visited the group, the practice of medicine, as a distinct, recognized branch of business, took its rise. An epidemic is said to have been extensively prevalent at that period, and the doctors then made by the necessities of the people, afterwards greatly increased in numbers, during the life of Kamehameha I. In the following reigns, the doctors had become so wise as to have a variety of nostrums, like the quacks in American cities.

Diseases in the South-Sea Islands.—On the authority of Mr. Whitney, the rapid depopulation of these Islands is ascribed to the introduction of syphilis, by the first voyagers. It now pervades the entire population, says Capt. Wilkes, and has reduced the natives to a morbid, sickly condition. Many of the women are incapable of child-bearing, and of the infants born, only a few live to come to maturity. In the district of Koloa, Oahu, infanticide is not known, and drunkenness rarely, if ever, happens. There are no epidemics—but asthma and ophthalmia are not uncommon. The latter disease is thought to be produced by fine particles of sand, forced into the eye by the strong winds. At Kauai, but few die of acute diseases. Dropsies, palsies, and diseases of the lungs, are causes of many deaths. Syphilis is rare at that particular place, but gonorrhœa prevails extensively.

National Medical Convention.—The New York Medical and Surgical Reporter of last week was published in advance of its usual time, and contained a full report of the doings of the late Medical Convention in that city. The condensed report in our own Journal last week was obtained from the more complete ones in the New York papers. It was all that could be then conveniently inserted, and was in fact sufficient to impart a general knowledge of the proceedings. Copies of the New York Surgical Reporter, we presume, can be obtained at the office of publication, by those who wish a fuller report.

Illinois Medical and Surgical Journal.—The first No. of a new series of this work, for April and May, has just reached us. The numbers are enlarged, containing 96 pages each, and are published every other month. It is to be issued simultaneously at Chicago, Ill., and at Indianapolis, Ind. The names of four editors—Drs. Blaney, Brainard, Herrick and Evans—are given on the cover, and original contributions from other sources are contained in this No., and promised in future ones.

Association of Medical Superintendents of American Institutions for the Insane.—The National Intelligencer, at Washington, states that “the second meeting of this Association convened at Coleman’s Hotel, in this city, on Monday last, and is attended by gentlemen of distinction from

nearly every section of the country. We understand that nearly every hospital and asylum for the insane, of any note, in the United States or Canada, is represented at the meeting, and that the discussions are likely to be important, and to lead to many improvements in the treatment of the insane, and the construction of buildings for their custody and management. Dr. Woodward, of Worcester, Mass., is President of the Association; Dr. Awl, of Columbus, Ohio, Vice President; and Dr. Kirkbride, of Philadelphia, Secretary.

Endemic Trismus.—A distinguished practitioner on Long Island, N.Y., writes under date of last week, that an endemic tendency to trismus and tetanus exists in his neighborhood, following the most trivial wounds. He has not yet been able to ascertain a satisfactory cause.

The same tendency has had a perpetual existence in the Danish Island of St. Croix, which has never been explained. The young negroes die from very slight injuries, which has proved a serious affair to the planters, as it is probably one of the direct causes of the decrease of slaves.

Strychnia in Coma.—Dr. A. W. Benton, of Sterling, Whiteside Co., Ill., has communicated to us, by letter, the following interesting result of his observations on the use of strychnia in coma, under the circumstances which he specifies.

"In some cases of fevers in malarious districts I have noticed (and probably others have) a kind of coma, which seems to be almost entirely functional, that is, without any apparent organic lesion to operate as a cause. In the commencement, these cases put on the usual symptoms common to remittent fevers, with perhaps a little more lassitude in the commencement, and less disturbance of the circulation.

"After treating them in the usual manner for a few days, the tongue becomes moist, the secretions nearly natural, the skin moist and soft, and everything seems to be improving, with the exception of the function of the brain. When we would look for convalescence, the patient begins to be dull and drowsy, and when roused seems to care for nothing, still he has his reason. It seems a great effort for him to speak; in fact, there seems to be a want of volition. He breathes full and easy, with no stertor, but at each expiration there is a distension of cheeks and lips, a kind of puffing out of the breath. There is no delirium and no muttering.

"In such cases I have used the strychnia, in doses of one-twelfth of a grain, once in six hours, with the happiest effect; the patient gradually arousing, and under its use for 24 or 48 hours, he becomes slowly convalescent.

"I do not know that this practice is new to others, but I do not recollect seeing it recommended."—*Bulletin of Medical Science.*

Mammoth Doses of Quinine in the Collapse Stage of Typhoid Fever. By J. Stringfellow, M.D.—A patient, 14 years of age, was violently attacked with fever, which continued for seven days, and collapsed into the typhoid type; profuse or colliquative perspiration then ensued, and could be prevented by stimulants only. I gave carb. ammonia, cayenne pepper, sulphuric acid and Cogniac brandy, every half hour or every hour, and could effect no change until I called in to their aid the *magnum Dei do-*

num, the sulphate of quinine, in doses of from thirty to fifty grains every hour or two, which remedy did never raise the pulse above the natural standard.—*Ibid.*

Preparation of the Tinctura Rhei Aquosa.—In order to prepare a watery tincture of rhubarb, which will keep better than that prepared as usual, according to the direction of the pharmacopœias, M. Simon recommends the following method. Three ounces of rhubarb cut up fine, are placed in a glass funnel, having a straight neck, the tube of which is loosely stopt with cotton; over this a sheet of white blotting paper is laid, over this again a layer of white, well-washed river sand. Six drachms of carbonate of potash dissolved in twenty-six ounces of water, are then slowly poured upon it, and afterwards six ounces of pure water. The fluid which was passed through, is then carefully evaporated, until two ounces, four drs. forty-eight grs. of alkaline extract remains, which is put up for use. In order to prepare the tincture from this extract, which will keep a long time, it is only necessary to dissolve ten drs. and twenty-four grs. in eight ounces six drs. of distilled water, and add two ounces of vinous cinnamon water.—*Pharmac. Central Blatt.*

Medical Miscellany.—Dr. Woodward, of Michigan, has been arrested, charged with having caused the death of Maria Harding, by administering medicines to procure abortion.—Dr. Hallick has been prosecuted in Philadelphia, for delivering lectures, say the papers, on anatomy.—An albino, 6 years of age, at Newark, N. J., was born of perfectly black parents.—The west wing of the Massachusetts General Hospital is completed and open for inspection.—Wm. Hancock, a dwarf, 17 years of age, weighing only 27 pounds and measuring 37 inches in height, has been exhibited at Wilmington, N. C.—A prize of \$250, offered in England for the best essay on Agricultural Chemistry, has been awarded to P. Norton, of Farmington, Conn.—The plague is still raging at the Island of Bona Vista. Report says it has also appeared at Goree, and from 15 to 20 were dying daily. Smallpox was also rife at the Island of Goree, Africa, in February.—Dr. Lucius Hitchcock, of New Orleans, has recovered \$1500 for an illegal arrest.—That once fashionable West India malady, called the *dengue*, is now prevalent among the horses at St. Louis, Missouri.—Messrs. Samuel S. & Wm. Wood, medical booksellers, 261 Pearl St., New York, have a grand assortment in their collection of books.—Mrs. Joanna Crane died at Berkley, Mass., last week, at the age of 100 years, 1 month, 15 days.—At Waldoboro', Mr. Geo. Cock, 99.

MARRIED.—In Boston, Dr. James M. Phipps to Miss S. Willard.

DIED.—At Hubbardston, Mass, Dr. Abijah S. Clark.—At Walpole, N. H., Dr. John Williams, 97 years and 10 months.—In New York, Dr. McKon, 95.—At Saratoga, N. Y., Dr. John Clark, proprietor of Congress Spring.—At Philadelphia, Dr. James Mease, 75.

Report of Deaths in Boston—for the week ending May 16th, 71.—Males, 30, females, 41. Stillborn, 4. Of consumption, 7—intemperance, 1—childbed, 2—disease of the bowels, 1—bilious fever, 1—delirium tremens, 1—convulsions, 2—typhus fever, 3—inflammation of the lungs, 4—smallpox, 1—measles, 15—lung fever, 4—scarlet fever, 5—infantile, 3—tumor, 1—ulcers, 1—cholera infantum, 1—suicide, 1—erysipelas, 1—dropsy, 2—hooping cough 1—accidental, 2—scrofula, 2—sudden, 1—croup, 1—dropsy of the brain, 4—rheumatism, 1—hernia, 1—disease of the liver, 1.

Under 5 years, 35—between 5 and 20 years, 11—between 20 and 40 years, 12—between 40 and 60 years, 11—over 60 years, 2.

Case of Cerebral Extravasation (Extrusion?) in a New-born Infant, followed by Spontaneous Recovery. By HATTERSLY P. WORTHINGTON, M.D., of Elkridge Landing, Maryland.—January 27th, 1846, at 1 o'clock, P. M., I was called to attend Mrs. L—, æt. 20, in labor with her first child. She had had moderate labor pains since 11 o'clock of the previous night. Upon examination, I found the head presenting in the first position (Velpau); the *os tinæ* slightly dilated; the pelvis below the medium size, but without any deformity of shape. The uterine efforts became more decided, were frequent, and of sufficient power to cause a steady advance of the head. Although the labor was tedious, I saw no necessity for artificial assistance, but left the case to nature, and at 3 o'clock the next morning the child—a fine male, weighing nine pounds—was delivered. The head appeared more than usually elongated, with a soft pulpy tumor, of the size and shape of half of a hen's egg, over the lamdoid suture, to the right of the posterior fontanelle. As the opposite side of the head assumed its natural shape, this tumor continued to occupy its situation, pressing out through the suture, and separating the bones from each other. At the expiration of two weeks it remained without change, feeling soft, without any perceptible fluctuation.

My esteemed friend, Dr. Robert E. Dorsey, now saw it with me, and we were induced to believe there was an arrest of bony formation on this part of the skull. We determined to do nothing for the present—the child enjoying good health—but to await the occurrence of events requiring interference.

On the 16th of February I observed an evident decrease in the size of the tumor; the following day this was more perceptible, and on the 18th it had entirely disappeared, and the sutures had approximated as nearly as upon the opposite side. The child continues to thrive, having apparently suffered but little inconvenience from this rather unusual freak of nature to facilitate its passage into the world. The labor was attended with consequences to the mother, the relation of which I shall reserve as the subject of a future paper.—*Medical Examiner.*

New Medical Works in London.—Hydrophaty in 1700; being the History of Cold Bathing, both Ancient and Modern; showing that the present Hydropathic Treatment was successfully followed in the 17th and 18th centuries; proving its efficiency, and containing a variety of cases and cures in gout, rheumatism, consumption, asthma, insanity, fever, smallpox, hypochondriasis, rickets, &c. &c. By Sir John Floyer, Knt., and Dr. Edward Baynard.—Medical Notes on China. By John Wilson, M.D., F.R.S., Inspector of Naval Hospitals and Fleets.—Chemistry of the Four Seasons. Illustrated with wood engravings. By Thomas Griffiths, Lecturer on Chemistry at Bartholomew's Hospital.—Instructions for making Unfermented Bread, with observations. By a Physician.—A Physiological Essay on the Thymus Gland. By John Simon, F.R.S., Demonstrator of Anatomy in King's College, London, and Assistant-Surgeon to the King's College Hospital.—Memoranda on Difficult Subjects in Anatomy, Surgery, and Physiology; for the Young Surgeon or the Student preparing for Examinations. Second edition, recompiled and much enlarged. By Mark Noble Bower, Surgeon.